2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#771118

Feb 10, 2005 Secretary of State

Entity Name: THE FOUNDATION FOR THE CHURCH OF THE PALMS - PRESBYTERIAN (U.S.A.), INC.

Current Principal Place of Business: New Principal Place of Business:

3224 BEE RIDGE ROAD SARASOTA, FL 34243 US

Current Mailing Address: New Mailing Address:

3224 BEE RIDGE ROAD SARASOTA, FL 34243 US

FEI Number: 59-2434393 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COLLINS, SCOTT 4623 TRAILS DR SARASOTA, FL 34232

OFFICERS AND DIRECTORS:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Date

Electronic Signature of Registered Agent

US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

COLLINS, SCOTT Name: Name: 4623 TRAILS DR Address: Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip:

Title: VPD () Delete Title: VD (X) Change () Addition

SKIPPER, RONALD Name: MILLER, BRIAN Y Name: Address: 3415 W FOREST LAKE CIR Address: 3224 BEE RIDGE ROAD City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34233

Title: () Delete Title: () Change () Addition

JONES, HERBERT Name: Name: 4274 BOCA POINTE DR Address: Address: City-St-Zip: SARASOTA, FL 34238 City-St-Zip:

(X) Change () Addition Title: SD () Delete Title: SD

Name: WEST, ANNETTE W Name: THOMASON, ELIZABETH L Address: 4216 BENT TREEE BLVD Address: 3224 BEE RIDGE ROAD City-St-Zip: SARASOTA, FL 34241 City-St-Zip: SARASOTA, FL 34243

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. SCOTT COLLINS Ρ 02/10/2005